

## TACTICAL RESPONSE REPORT/Chicago Police Department

1. DATE OF INCIDENT 30-APR-2013		TIME 21:13:00		2. ADDRESS OF OCCURRENCE 8806 S BURLEY AVE CHICAGO, IL 60617			3. LOCATION CODE 277		4. BEAT/OCCUR 0424		
MEMBER INVOLVED	5. POSITION 9161	6. LAST NAME JONES JR	7. FIRST NAME JEFFERY W	8. STAR NO. 4933	9. SEX <input checked="" type="checkbox"/> M <input type="checkbox"/> F	10. RACE CODE BLK	11. AGE [REDACTED]	12. HT. 603	13. WT. 185		
	14. DATE OF APPT. [REDACTED]		15. EMPLOYEE NO. [REDACTED]		16. UNIT & BEAT OF ASSIGNMENT 004 0463C		17. DUTY STATUS <input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off		18. MEMBER INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		
SUBJECT INFORMATION	20. LAST NAME GLAZE		21. FIRST NAME ORTIZ		22. M.I. [REDACTED]	23. SEX <input checked="" type="checkbox"/> M <input type="checkbox"/> F	24. RACE BLK	25. D.O.B. [REDACTED]	26. HT. 605	27. WT. 155	
	28. ADDRESS [REDACTED]		29. TELEPHONE NO. [REDACTED]		30. WAS SUBJECT ARMED? FIREARM - SEMI-AUTOMATIC, OTHER (SPECIFY) <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No		31. SUBJECT INJURED? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No		32. SUBJECT ALLEGED INJURY? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		
33. WHERE WAS MEDICAL TREATMENT OBTAINED? COOK COUNTY HOSPITAL - STROGER HOS				34. BY WHOM? DR. [REDACTED]		35. CONDITION <input checked="" type="checkbox"/> 01 Hospitalized <input type="checkbox"/> 02 Apparently Normal <input type="checkbox"/> 03 Not Hospitalized		36. CHARGES PLACED 720 ILCS 5.0/12-2-A-6, 720 ILCS 5.0/12-2-A-6			
38. DNA				37. CB NO. 18648698		IR NO.		DNA			
REASON FOR USE OF FORCE (Check all that apply)	SUBJECT'S ACTIONS		ACTIVE RESISTER		ASSAILANT/ASSAULT		ASSAILANT/BATTERY		ASSAILANT/DEADLY FORCE		
	DID NOT FOLLOW VERBAL DIRECTION <input checked="" type="checkbox"/> STIFFENED (DEAD WEIGHT) <input type="checkbox"/> OTHER _____		FLED <input checked="" type="checkbox"/> PULLED AWAY <input type="checkbox"/> OTHER _____		IMMINENT THREAT OF BATTERY <input type="checkbox"/> OTHER _____		ATTACK WITH WEAPON <input type="checkbox"/> ATTACK WITHOUT WEAPON <input type="checkbox"/> OTHER _____		USES FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM <input checked="" type="checkbox"/> WEAPON <input type="checkbox"/> OTHER _____		
WEAPON DISCHARGE INCIDENT	MEMBER'S RESPONSE		OPEN HAND STRIKE		ELBOW STRIKE		KNEE STRIKE		FIREARM		
	MEMBER PRESENCE <input checked="" type="checkbox"/> VERBAL COMMANDS <input checked="" type="checkbox"/> ESCORT HOLDS <input type="checkbox"/> WRISTLOCK <input type="checkbox"/> ARMBAR <input type="checkbox"/> PRESSURE SENSITIVE AREAS <input type="checkbox"/> CONTROL INSTRUMENT <input type="checkbox"/> OC/CHEMICAL WEAPON W/AUTHORIZATION <input type="checkbox"/> OTHER _____		TAKE DOWN / EMERGENCY HANDCUFFING <input checked="" type="checkbox"/> OC CHEMICAL WEAPON <input type="checkbox"/> CANINE <input type="checkbox"/> TASER (Probe Discharge) <input type="checkbox"/> TASER (Contact Stun) <input type="checkbox"/> TASER (Laser Targeted) <input type="checkbox"/> TASER (Spark Displayed) <input type="checkbox"/> OTHER _____		CLOSED HAND STRIKE/PUNCH <input type="checkbox"/> IMPACT WEAPON (Describe in Box 40) <input type="checkbox"/> OTHER _____		KICKS <input type="checkbox"/> IMPACT MUNITION (Describe in Box 40) <input type="checkbox"/> OTHER _____		OTHER _____		
CASE INFO.	39. DNA				40. ADDITIONAL INFORMATION						
	POSITION		STAR NO.		UNIT						
SIGNATURES	41. WEAPON TYPE		42. INCIDENT OCCURRED		43. LIGHTING CONDITIONS		44. WEATHER CONDITIONS				
	<input type="checkbox"/> 01 REVOLVER <input type="checkbox"/> 02 RIFLE <input type="checkbox"/> 03 SHOTGUN <input checked="" type="checkbox"/> 04 SEMI-AUTO PISTOL <input type="checkbox"/> 05 CHEMICAL WEAPON <input type="checkbox"/> 06 TASER (Probe Discharge) <input type="checkbox"/> 07 OTHER		<input type="checkbox"/> Indoors <input checked="" type="checkbox"/> Outdoors		<input type="checkbox"/> 01 Daylight <input type="checkbox"/> 02 Night <input type="checkbox"/> 03 Dawn <input checked="" type="checkbox"/> 04 Dusk <input type="checkbox"/> 05 Poor Artificial <input type="checkbox"/> 06 Good Artificial		CLEAR				
SIGNATURES	49. TASER DART ID NO.		50. WEAPON SERIAL NO. (Include Letters)		51. CHICAGO GUN REG. NO.		52. IL FIREARM OWNER ID. NO.		53. HANDGUN CERTIFICATE NO.		
	[REDACTED]		HDN533		R010476S		[REDACTED]		[REDACTED]		
SIGNATURES	54. SPECIAL WEAPON CERTIFICATE NO.		55. PROPERTY INVENTORY NO.		56. TYPE OF AMMUNITION USED		57. NO. OF WEAPONS DISCHARGED BY THIS MEMBER		58. TOTAL NO. OF SHOTS MEMBER FIRED		
	[REDACTED]		[REDACTED]		Department Issued		1		5		
SIGNATURES	59. WHO FIRED FIRST SHOT		60. WAS FIREARM RELOADED DURING INCIDENT		61. NO. OF CARTRIDGES/SHOT SHELLS RELOADED		62. HOW WAS MEMBER'S HANDGUN WORN		63. DID MEMBER USE SIGHTS		
	<input checked="" type="checkbox"/> 01 MEMBER <input type="checkbox"/> 02 OFFENDER <input type="checkbox"/> 03 OTHER (Specify)		<input type="checkbox"/> 01 YES <input checked="" type="checkbox"/> 02 NO		[REDACTED]		<input checked="" type="checkbox"/> 01 RT. SIDE (WAIST) <input type="checkbox"/> 02 LT. SIDE (WAIST)		<input checked="" type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO		
SIGNATURES	64. SPECIFY METHOD/EQUIPMENT USED TO RELOAD				65. DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED				66. DID MEMBER USE SIGHTS		
	[REDACTED]				<input type="checkbox"/> 01 0 - 05 FT. <input type="checkbox"/> 02 05 - 10 FT. <input checked="" type="checkbox"/> 03 10 - 15 FT. <input type="checkbox"/> 04 OVER 15 FT.				<input checked="" type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO		
SIGNATURES	68. PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBER'S WEAPON				69. POSITION OF MEMBER DISCHARGING WEAPON				70. EVENT NO.		
	<input checked="" type="checkbox"/> 01 PERSON <input type="checkbox"/> 02 OBJECT <input type="checkbox"/> 03 BOTH <input type="checkbox"/> 04 UNKNOWN				<input checked="" type="checkbox"/> 01 STANDING <input type="checkbox"/> 02 LYING DOWN <input type="checkbox"/> 03 SITTING <input type="checkbox"/> 04 KNEELING <input type="checkbox"/> 05 OTHER (SPECIFY)				1312017321		
SIGNATURES	72. NOTIFICATIONS (OC OR TASER INCIDENT):				72. NOTIFICATIONS (FIREARM INCIDENT):				71. R.D. NO.		
	<input type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT. & W.C./DIST. OF OCCUR.				<input checked="" type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT. & W.C./DIST. OF OCCUR. <input checked="" type="checkbox"/> OP COMMAND <input checked="" type="checkbox"/> DET. DIV.				HW254770		
SIGNATURES	73. REPORTING MEMBER (Print Name)				74. REVIEWING SUPERVISOR (Print Name)				DATE REVIEWED		
	JONES JR, JEFFERY W				BEN, SENORA				01-MAY-2013 04:41:38		
75. SIGNATURE				76. SIGNATURE				TIME			
[REDACTED]				[REDACTED]				01-MAY-2013 04:41:38			

LOG# 1061883

Attachment 9

## WATCH COMMANDER/OCIC REVIEW

THE WATCH COMMANDER WILL COMPLETE THE REVIEW SECTION FOR 1.) ALL INCIDENTS THAT DID NOT INVOLVE THE DISCHARGE OF A FIREARM; 2.) FIREARM DISCHARGE INCIDENTS INVOLVING THE DESTRUCTION OF AN ANIMAL OR; 3.) ACCIDENTAL DISCHARGE OF A FIREARM NOT RESULTING IN AN INJURY TO ANY PERSON.

THE ADS WILL COMPLETE THE REVIEW SECTION FOR ALL INCIDENTS INVOLVING: 1.) THE DISCHARGE OF A FIREARM OR IMPACT MUNITIONS BY OR AT A DEPARTMENT MEMBER EXCEPT FOR AN ANIMAL DESTRUCTION OR AN ACCIDENTAL DISCHARGE THAT DOES NOT RESULT IN AN INJURY TO ANY PERSON; 2.) MEMBER'S USE OF FORCE BY WHATEVER MEANS THAT RESULTS IN THE DEATH OF A PERSON; 3.) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 OR 2.

75. SUBJECT'S STATEMENT REGARDING THE USE OF FORCE

☐ DNA

☐ REFUSED

☒ UNABLE TO INTERVIEW (Specify Reason)

Offender is currently being treated for multiple GSWs and is unable to be interviewed at this time.

76. WATCH COMMANDER/OCIC RATIONALE FOR BOX 77 FINDING

Based on what is known at this time, a preliminary determination has been made that the discharges by Police Officer Jeffrey Jones are within department guidelines regarding the use of force in that during his pursuit, the above offender turned toward Officer Jones while holding a shiny object in his hand after repeatedly ignoring Officer Jones orders to show his hands. The offender did these actions on three occasions placing Officer Jeffrey Jones in fear of being shot. As the offender was being taken into custody a large hostile crowd converged on the officer requiring the use of several units to assist in pushing back the crowd.

77. WATCH COMMANDER/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION:

☒ I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS WERE IN COMPLIANCE WITH DEPARTMENT PROCEDURES AND DIRECTIVES.

☐ I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED.

LOG NO./CRNO 1061883 OBTAINED

78. WATCH COMMANDER/OCIC (Print Name)

VELEZ, CARLOS E

SIGNATURE

DATE COMPLETED

TIME

01-MAY-2013 05:03:56

79. DISTRIBUTION OF ORIGINAL TRR:

A TRR PACKET, INCLUDING THE TRR AND COPIES OF THE BELOW LISTED ATTACHMENTS WILL BE FORWARDED TO THE OFFICE OF PROFESSIONAL STANDARDS.

ATTACHMENTS - PHOTOCOPIES OF:

☐ CASE REPORT

☐ ARREST REPORT

☐ SUPPLEMENTARY REPORT

☒ OFFICER BATTERY REPORT

☐ TO-FROM-SUBJECT REPORTS FROM DEPARTMENT WITNESS(ES)

☐ I.O.D. REPORT

☐ CR INITIATION REPORT

80. TOTAL TRR'S THIS EVENT No.

4